

Notice to Applicant: Persons applying for authorization to conduct a Learn to Hunt Program, as provided in s NR 19.025, Wis. Adm. Code., must provide complete information requested on this application. Failure to do so may result in denial of the application. Information will be used for management of DNR programs. Personally identifiable information collected on this form, including such data as your name, address, phone number, may be used for purposes other than that for which it was originally collected. Under Wisconsin's open records laws, DNR is required to provide all non-confidential information to any person who requests it. Such information may be provided to the public in written or electronic form.

Application Deadline: All applications must be received at our local DNR office no later than 30 days prior to your Learn to Hunt event. The applicant must provide a final list of the names, addresses, and phone numbers of all mentors two weeks before the event is to occur.

Participation Limits: No person may participate in more than one species-specific Learn to Hunt program (e.g., may not participate in two or more "Learn to Deer Hunt" programs.) Participants over 16 years of age must purchase a Federal Waterfowl Stamp and hunt within the federal waterfowl season framework.

Regulation Compliance: Unless otherwise provided by the Department, all participants and designated mentors/instructors shall comply with all hunting rules and laws applicable to the wildlife species hunted.

Posting Requirements: The applicant shall post the field portion of the activity with at least one sign advising of the activity. These signs shall indicate the date and times of the event and the dates and hours during which hunting by nonparticipants is prohibited. All such notices shall be removed from state properties within 2 days of the close of the event.

Fees: The sponsor of this event shall not charge fees in excess of the cost of educational materials, equipment rentals, meals or overnight lodging.

Applicant Information

Organization Name

Applicant First Name	MI	Last Name	Day Phone	Evening Phone
Applicant Home Address			City	State Zip Code
Hunter Education Instructor First Name	MI	Last Name	Hunter Education Instructor Number	

Learn to Hunt Event Information

Species to be Hunted		Equipment to be Used	Requested Date of Hunt
<input type="checkbox"/> Pheasant	<input type="checkbox"/> Ruffed Grouse	<input type="checkbox"/> Shotgun	Requested Bag Limit for Species Hunted
<input type="checkbox"/> Rabbits/Squirrels	<input type="checkbox"/> Deer	<input type="checkbox"/> Rifle	
<input type="checkbox"/> Wild Turkey	<input type="checkbox"/> Ducks	<input type="checkbox"/> Muzzle loader	
<input type="checkbox"/> Other _____	<input type="checkbox"/> Geese	<input type="checkbox"/> Bow and arrow	
Number of Mentors		Anticipated Number of Participants (Ratio of mentors to participants MUST be 1:1 du	

Below, provide name, address and phone number of owner of property on which program is to be held. Include a copy of a platbook map with boundaries marked.

Property Owner First Name	MI	Last Name	Phone Number	
Property Address		City	State	Zip Code
Number of Acres to be Hunted	Will a fee be charged for this program?		If yes, how much?	
	<input type="checkbox"/> Yes <input type="checkbox"/> No			

Specify what the fees will cover in your program.

Attach a copy of your lesson plan for the day. A minimum of four hours instruction in the field or in the classroom is required. Provide times, title of session, brief outline of major topics covered under each session, and name of each instructor covering the various segments.

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Property Manager, Private Landowner or Tenant Authorization

Notice to Property Manager/Private Landowner/Tenant: As provided in NR 19.025, Wis. Adm. Code, Property Managers or Landowners must provide authorization for persons to conduct a Learn to Hunt Program on private lands. Failure to do so may result in denial of the application. Personally identifiable information collected will be used for management of DNR programs and may also be used for purposes other than that for which it was originally collected. Under Wisconsin's open records laws, DNR is required to provide all non-confidential information to any person who requests it. Such information may be provided to the public in written or electronic form.

I (we) certify that the applicant has the authority to conduct a Learn to Hunt program on the lands described above under my (our) ownership. (NOTE: The Department will not issue an authorization for lands on which authority has not been granted).

Property Manager, Private Landowner or Tenant Signature	Date Signed
Property Manager, Private Landowner or Tenant Signature	Date Signed

Applicant Certification

Applicant Signature	Date Signed
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Approval (Leave Blank -- For Department Use Only)

The State of Wisconsin Department of Natural Resources hereby issues an authorization to conduct a Learn to Hunt program to the said applicant on the lands described. The authorization is contingent upon the applicant submitting a final list of participants and mentors two weeks before the scheduled event.

State of Wisconsin
Department of Natural Resources
For the Secretary

Approved by:

Local DNR Wildlife Biologist	Date Signed
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Application denied for the following reasons.

According to State Statute 29.155(4): A denial of a waiver request is not subject to further review under ch. 227. All other regulations apply

The approved form must be in the possession of the lead instructor during the Learn to Hunt event and must be produced upon request of any Department of Natural Resources employee.

Top Copy: Applicant
Second Copy: Local Wildlife Biologist
Third Copy: Local Warden
Fourth Copy: Outdoor Heritage Specialist, WM/4

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List of Mentors

Notice to Mentor: All mentors participating in this Learn to Hunt event must provide information requested below,, as provided in NR 19.025, Wis. Adm. Code. Information will be used for management of DNR programs. Personal information collected, including such data as your name, address, phone number, may be used for purposes other than that for which it was originally collected. Under Wisconsin's open records laws, DNR is required to provide all non-confidential information to any person who requests it. Such information may be provided to the public in written or electronic form.

Notice to Program Applicant: Two weeks before the event is to occur, the applicant must provide a list of names, addresses and phone numbers of all mentors. Failure to provide information may result in denial of your application.

Mentors must have a minimum of 5 years hunting experience.

Mentor First Name (Type or Print)	MI	Last Name	Phone	
Address		City	State	Zip Code
Mentor First Name (Type or Print)	MI	Last Name	Phone	
Address		City	State	Zip Code
Mentor First Name (Type or Print)	MI	Last Name	Phone	
Address		City	State	Zip Code
Mentor First Name (Type or Print)	MI	Last Name	Phone	
Address		City	State	Zip Code
Mentor First Name (Type or Print)	MI	Last Name	Phone	
Address		City	State	Zip Code
Mentor First Name (Type or Print)	MI	Last Name	Phone	
Address		City	State	Zip Code
Mentor First Name (Type or Print)	MI	Last Name	Phone	
Address		City	State	Zip Code
Mentor First Name (Type or Print)	MI	Last Name	Phone	
Address		City	State	Zip Code
Mentor First Name (Type or Print)	MI	Last Name	Phone	
Address		City	State	Zip Code
Mentor First Name (Type or Print)	MI	Last Name	Phone	
Address		City	State	Zip Code

If you need more space, please copy this page as a blank before filling in information, and attach completed pages as necessary.

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Learn to Hunt Program Participant Report

Notice to Participant: Persons who participate in this Learn to Hunt program, must provide complete information requested on this report. Failure to provide information may result in persons being ineligible to participate in the event. Under penalty of law, no person may participate in more than one Learn to Hunt program for a particular wildlife species. Information provided will be used for management of DNR programs. Personal information collected, including such data as your name, address and phone number, may be used for purposes other than that for which it was originally collected. Under Wisconsin's open records laws, DNR is required to provide all non-confidential information to any person who requests it. Such information may be provided to the public in written or electronic form.

Notice to Program Applicant: Within two weeks after the event has occurred, applicant must provide participant names, addresses, phone numbers and game harvested information to the Outdoor Heritage Specialist, as required by NR 19.025, Wis. Adm. Code.

Host Organization Name

Contact Person First Name MI Last Name

Date of Hunt	Species Hunted	No. of Participants	No. of Animals Harvested by Group	No. of Instructors and Mentors
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Participant Information -- Please print clearly

Participant First Name (Type or Print)	MI	Last Name	Game Harvested
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Phone	Address	City	State	Zip Code
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Participant First Name (Type or Print)	MI	Last Name	Game Harvested
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Phone	Address	City	State	Zip Code
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Participant First Name (Type or Print)	MI	Last Name	Game Harvested
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Phone	Address	City	State	Zip Code
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Participant First Name (Type or Print)	MI	Last Name	Game Harvested
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Phone	Address	City	State	Zip Code
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Participant First Name (Type or Print)	MI	Last Name	Game Harvested
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Phone	Address	City	State	Zip Code
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Participant First Name (Type or Print)	MI	Last Name	Game Harvested
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Phone	Address	City	State	Zip Code
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Participant First Name (Type or Print)	MI	Last Name	Game Harvested
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Phone	Address	City	State	Zip Code
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Participant First Name (Type or Print)	MI	Last Name	Game Harvested
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Phone	Address	City	State	Zip Code
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Participant Information -- Please print clearly

Participant First Name (Type or Print)			MI	Last Name		Game Harvested	
Phone	Address		City		State	Zip Code	
Participant First Name (Type or Print)			MI	Last Name		Game Harvested	
Phone	Address		City		State	Zip Code	
Participant First Name (Type or Print)			MI	Last Name		Game Harvested	
Phone	Address		City		State	Zip Code	
Participant First Name (Type or Print)			MI	Last Name		Game Harvested	
Phone	Address		City		State	Zip Code	
Participant First Name (Type or Print)			MI	Last Name		Game Harvested	
Phone	Address		City		State	Zip Code	
Participant First Name (Type or Print)			MI	Last Name		Game Harvested	
Phone	Address		City		State	Zip Code	
Participant First Name (Type or Print)			MI	Last Name		Game Harvested	
Phone	Address		City		State	Zip Code	
Participant First Name (Type or Print)			MI	Last Name		Game Harvested	
Phone	Address		City		State	Zip Code	
Participant First Name (Type or Print)			MI	Last Name		Game Harvested	
Phone	Address		City		State	Zip Code	
Participant First Name (Type or Print)			MI	Last Name		Game Harvested	
Phone	Address		City		State	Zip Code	

Copy this page blank and attach completed additional pages as necessary. Mail completed forms within two weeks after the Learn to Hunt program to:

Outdoor Heritage Specialist
Wisconsin DNR Bureau of Wildlife Management
Box 7921
Madison, WI 53707-7921